

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)? No

Number of Copies of CRF::

Title:: MODULAR SWITCHING DEVICE

Attorney Docket Number:: 1034456-000042

Request for Early Publication? No

Request for Non-Publication? No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity? No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full Capacity

Given Name:: Harri

Middle Name::

Family Name:: MATTLAR

Name Suffix::

City of Residence:: Iskmo

State or Province of Residence::

Country of Residence:: Finland

Street of Mailing Address:: Jungsundsvägen 809

City of Mailing Address:: Iskmo

State or Province of Mailing
Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing FI-65760

Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full Capacity

Given Name:: Rainer

Middle Name::

Family Name:: KOLMONEN

Name Suffix::

City of Residence:: Laihia

State or Province of Residence::

Country of Residence:: Finland

Street of Mailing Address:: Urputie 3 as 1

City of Mailing Address:: Laihia

State or Province of Mailing Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing Address:: FI-66400

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full Capacity

Given Name:: Juho

Middle Name::

Family Name:: SALO

Name Suffix::

City of Residence:: Vaasa

State or Province of Residence::

Country of Residence:: Finland

Street of Mailing Address:: Huuhkajankatu 19 A 2

City of Mailing Address:: Vaasa

State or Province of Mailing Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing Address:: FI-65320

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full Capacity

Given Name:: Osmo

Middle Name::

Family Name:: PIKKALA

Name Suffix::

City of Residence:: Sundom

State or Province of Residence::

Country of Residence:: Finland

Street of Mailing Address:: Kronvikintie 323

City of Mailing Address:: Sundom

State or Province of Mailing
Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing
Address:: FI-65410

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full Capacity

Given Name:: Aki

Middle Name::

Family Name:: SUUTARINEN

Name Suffix::

City of Residence:: Vaasa

State or Province of Residence::

Country of Residence:: Finland

Street of Mailing Address:: Pihkatie 12 A 5

City of Mailing Address:: Vassa

State or Province of Mailing
Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing
Address:: FI-65320

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full Capacity

Given Name:: Jarkko
Middle Name::
Family Name:: ALANEN
Name Suffix::
City of Residence:: Ylihärmä
State or Province of Residence::
Country of Residence:: Finland
Street of Mailing Address:: Koukkuluomantie 301
City of Mailing Address:: Yliharma
State or Province of Mailing Address::
Country of Mailing Address:: Finland
Postal or Zip Code of Mailing Address:: FI-62375
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Finland
Status:: Full Capacity
Given Name:: Martti
Middle Name::
Family Name:: TUONONEN
Name Suffix::
City of Residence:: Vaasa
State or Province of Residence::

Country of Residence:: Finland

Street of Mailing Address:: Fasaaninkatu 2 A 2

City of Mailing Address:: Vaasa

State or Province of Mailing Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing Address:: FI-65370

Correspondence Information

Correspondence Customer Number:: **21839**

Phone Number:: 703 836 6620

Fax Number: 703 836 2021

Representative Information

Representative Customer Number:: **21839**

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/FI2005/000032	01/18/05

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Finland	20040065	01/19/04	Yes

Assignee Information

Assignee Name::	ABB OY
Street of Mailing Address::	Strömbergintie 1
City of Mailing Address::	Helsinki
State or Province of Mailing Address::	
Country of Mailing Address::	Finland
Postal or Zip Code of Mailing Address::	FI-00380